

JUSTICE COURT, LAS VEGAS TOWNSHIP Clark County, Nevada <hr/> Name of Plaintiff(s): <hr/> <div style="text-align: center; border-top: 1px solid black; border-bottom: 1px solid black; padding: 2px;">VERSUS</div> <hr/> Name of Defendant(s): <hr/>	Case No. _____ Department No. _____ <div style="text-align: center;">PROOF OF SERVICE (for use by Plaintiffs in Small Claims Cases)</div>
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I, (Insert name of person performing service) _____, being duly sworn or under penalty of perjury, state that at all times relevant, I was over 18 years of age and not a party to or interested in the above-captioned case; that I received a copy of the (check the name of documents you served) ☐ Small Claims Complaint and Summons, ☐ Amended Small Claims Complaint and Summons, and that I served the same on Defendant (insert Defendant's name) _____ on (insert date and time you served the documents) _____ the ____ day (date) of _____ (month), 20 ____, (year) at the hour of ____ M., by (complete appropriate paragraph below):

☐ **Personal service per JCRCP 4(d)(6):** Delivering and leaving a copy with Defendant at (insert address at which you served) _____.

☐ **Substitute service per JCRCP 4(d)(6):** Delivering and leaving a copy with (insert name or physical description of person served) _____, a person of suitable age and discretion residing at Defendant's dwelling house or usual place of abode, at (insert Defendant's address) _____.

☐ **Service by registered or certified mail per JCRCP 91 (if allowed):** Depositing a copy in a mailbox of the United States Post Office, enclosed in a sealed envelope, postage prepaid, certified or registered mail, return receipt requested, addressed to Defendant at (insert Defendant's address) _____.
(A copy of the signed return receipt must be attached.)

☐ **Service on a business entity per JCRCP 4(d)(1) or (2):** Delivering and leaving a copy with (insert name or physical description of person served) _____, who is Defendant's (check one) ☐ president or other head, ☐ secretary, ☐ cashier, ☐ managing agent, ☐ resident agent, or ☐ other (specify) _____, at (insert address at which you served) _____.

Date: _____ **Signature:** _____

☐ Residential/ ☐ Business Address: _____ Phone: _____

You MUST check one of the following boxes AND have this affidavit notarized (bottom left) or sign the unsworn declaration per NRS 53.045 (bottom right):

☐ I am a licensed process server or an employee of a licensed process server; my license or registration number is (insert license or registration number): _____.

☐ I am not required to be licensed as a process server. I am either exempt as a peace officer; or I am not engaged in the business of a process server as I am serving without compensation, and on behalf of a litigant who is a natural person and not a business entity, and I am not serving legal process more than three times this calendar year.

SUBSCRIBED AND SWORN to before me this _____ day of _____, 20____. NOTARY PUBLIC in and for the County of _____, State of _____.	"I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct." (Signature): _____ (Date): _____
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